# JC17 Rec'd PCT/PTO 2 0 JUN 2005

## **Application Data Sheet**

### **Application Information**

Application Number::

Filing Date::

Application Type::

**US National Phase** 

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

Title:: METHOD FOR OPTICAL AUTHENTICATION

AND IDENTIFIACTION OF OBJECTS AND

**DEVICE THEREFOR** 

Attorney Docket Number::

4590-427

Request for Early Publication::

Request for Non-Publication::

Suggested Drawing Figure::

Total Drawing Sheets::

**Applicant Information** 

Applicant Authority Type::

Inventor

3

Primary Citizenship Country::

France

Status::

Given Name::

Joseph

Middle Name::

Family Name::

COLINEAU

Name Suffix::

City of Residence::

**Bures Sur Yvette** 

State or Province of Residence::

Country of Residence::

France

Street of Mailing Address::

5, rue Dumenico Scariatti

City of Mailing Address::

**Bures Sur Yvette** 

Postal or Zip Code::

91440

# 10/539767 JC17 Rec'd PCT/PTO 20 JUN 2005

Applicant Authority Type::

Inventor

Primary Citizenship Country::

**France** 

Status::

Given Name::

Jean-Claude

Middle Name::

Family Name::

**LEHUREAU** 

Name Suffix::

City of Residence::

Sainte Genevieve Des Bois

State or Province of Residence::

Country of Residence::

**France** 

Street of Mailing Address::

City of Mailing Address::

Sainte Genevieve Des Bois

Postal or Zip Code:: 91700

Applicant Authority Type::

Inventor

Primary Citizenship Country::

**France** 

Status::

Given Name::

Jean-Claude

Middle Name::

Family Name::

**LEHUREAU** 

Name Suffix::

City of Residence::

Sainte Genevieve Des Bois

State or Province of Residence::

Country of Residence::

France

Street of Mailing Address::

18, rue Buffon

City of Mailing Address::

Sainte Genevieve Des Bois

Postal or Zip Code::

91700

# 10/539767

		J	C17 Rec'd PC1/	PIO ZOJUN ZU	
Applicant Authority Typ	oe:: Inve	entor			
Primary Citizenship Co	ountry:: Fra	nce			
Status::					
Given Name::	Rer	naud			
Middle Name::					
Family Name::	BIN	ET			
Name Suffix::					
City of Residence::	Pal	aiseau			
State or Province of R	esidence::				
Country of Residence	:: Fra	France			
Street of Mailing Addre	ess:: 7, a	7, avenue des Cosmonautes			
City of Mailing Addres	s:: Pal	aiseau			
Postal or Zip Code::	911	120			
Correspondence Correspondence Cust Phone Number:: Fax Number:: E-Mail Address::	(	33308 (703)-68 (703) 51			
Representative Ir	ıformation				
Representative Custo	mer Number::				
Representative Desi	ignation:: Regi	stration	Number:: Repre	sentative Name::	
Primary or Associate					
Domestic Priority	/ Information				
Application::	Continuity Type::	Pa	rent Application::	Parent Filing Date::	

# JC17 Rec'd PCT/770 20 JUN 2005

### Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
FR	02 16366	December 20, 2002	Yes
	PCT/EP03/50975	December 10, 2003	Yes

### **Assignee Information**

Assignee Name::

**THALES** 

Street of Mailing Address::

45, rue de Villiers

City of Mailing Address::

**Neuilly Sur Seine** 

State of Mailing Address::

Country of Mailing Address::

**France** 

Postal or Zip Code::

92200